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Fill	in this information to identify your o	ase:				
De	btor 1 Jacqueline	E. Neider				
1	btor 2 puse, if filing)					
Un	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA			
Case number 19-10821				Chec	k if this is:	
(If k	nown)		-	■ A	n amende	d filing
						ent showing postpetition chapter as of the following date:
0	fficial Form 106I			\overline{N}	IM / DD/ Y	YYY
S	chedule I: Your Inc	ome				12/1
	ch a separate sheet to this form. It 1: Describe Employment Fill in your employment	On the top of any additi		e and case nu	·	
	information.		Debtor 1			or non-filing spouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed		☐ Emplo	•
	information about additional employers.		☐ Not employed		■ Not er	mployed
	, ,	Occupation				
	Include part-time, seasonal, or self-employed work.	Employer's name	Giant Martin's			
	Occupation may include student or homemaker, if it applies.	Employer's address				
		How long employed t	here?		_	
Pa	rt 2: Give Details About Mo	nthly Income				
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for	r any line, write	\$0 in the	space. Include your non-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the information for all	employers for	that perso	n on the lines below. If you need
				For Del	otor 1	For Debtor 2 or non-filing spouse

Official Form 106I Schedule I: Your Income page 1

2,237.94

2,237.94

0.00

+\$

\$

3.

0.00

0.00

0.00

List monthly gross wages, salary, and commissions (before all payroll

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

3.

deductions). If not paid monthly, calculate what the monthly wage would be.

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Debtor 1		Jacqueline E. Neider	Ca	ase number (if known)	19-10821			
					For Debtor 1	For Debto		
	Cop	y line 4 here	4.	-	2,237.94	\$	0.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	9	416.67	\$	0.00)
	5b.	Mandatory contributions for retirement plans	5b.	,	0.00	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.			\$	0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	,	953.77	\$	0.00	_
	5f.	Domestic support obligations	5f.	9		\$	0.00	_
	5g.	Union dues	5g.	9	0.00	\$	0.00	_
	5h.	Other deductions. Specify:	_ 5h.	+ \$	0.00	+ \$	0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		\$	0.00	_
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	867.50	\$	0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	9	0.00	\$	0.00	
	8b.	Interest and dividends	8b.			\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			<u> </u>	*		_
		settlement, and property settlement.	8c.			\$	0.00	_
	8d.	Unemployment compensation	8d.			\$	0.00	_
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e.	,	0.00	\$	759.92	<u>-</u>
	Oi.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	Ş	0.00	\$	0.00	
	8g.	Pension or retirement income	– 8g.			\$	0.00	_
	8h.	Other monthly income. Specify: tax refund	8h.			·		
		contribution from children	_	9	623.00	\$ 0.00		_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	703.00	\$	759.9	2
10.		tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	B	1,570.50 + \$	759.92	= \$	2,330.42
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	deper			•	lo l	
	Spec		avalla	DIC	to pay expenses list	11.		0.00
12.	12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies							
13.	Do v	ou expect an increase or decrease within the year after you file this form	?				Combi month	ned ly income
		No.	-					
		Yes. Explain: Debtor's non filing spouse is scheduled to start r Based on an anticipated 15 hour work week, his						

Official Form 106I Schedule I: Your Income page 2

\$400.00.

Fill	in this informat	tion to identify yo	our case:								
Deb	Jacqueline E. Neider						Check if this is: An amended filing				
Deb	tor 2					_	ū	ving postpetition chapter			
(Spo	ouse, if filing)							the following date:			
United States Bankruptcy Court for the: _EASTERN DISTRICT OF PENNSYLVANIA							MM / DD / YYYY				
	e number 19 nown)	-10821									
Of	fficial Fo	rm 106J									
So	chedule	J: Your	Exper	ises				12/15			
info	ormation. If me		eded, atta	. If two married people ar ch another sheet to this n.							
Par		ibe Your House	hold								
1.	Is this a join										
	■ No. Go to □ Yes. Does		in a separ	ate household?							
	□ No	0	·								
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debto	or 2.				
2.	Do you have dependents? ■ No										
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?			
	Do not state							□ No			
	dependents r	names.						☐ Yes			
								□ No □ Yes			
					-			□ No			
								☐ Yes			
								□ No			
_	_							☐ Yes			
3.	expenses of	enses include people other t your depende	han $_{oldsymbol{\square}}$	No Yes							
exp	imate your ex	ate Your Ongoi penses as of yo date after the l	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed the second	orm as a sup	oplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the			
the		assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses			
4.		r home owners d any rent for th		ses for your residence. I	nclude first mortgag	e 4. \$		622.67			
	If not includ	ed in line 4:									
						40 °		0.00			
		state taxes ty, homeowner's	s. or renter	's insurance		4a. \$ 4b. \$	-	0.00			
		•		pkeep expenses		4c. \$		50.00			
		owner's associat	•			4d. \$		0.00			
5.	Additional n	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00			

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Debtor	¹ Jacqueli	ne E. Neider	Case num	ber (if known)	19-10821
6. Ut	ilities:				
o. o. 6a		, heat, natural gas	6a.	\$	245.00
6b		wer, garbage collection	6b.	· -	90.00
6c		e, cell phone, Internet, satellite, and cable services	6c.	·	175.00
6d	•		6d.	*	0.00
		ekeeping supplies	7.	·	500.00
		children's education costs	7. 8.	\$	
_			o. 9.	*	0.00
	-	ry, and dry cleaning		\$	100.00
		products and services	10.	·	50.00
		ntal expenses	11.	\$	75.00
		Include gas, maintenance, bus or train fare.	12.	\$	220.00
	not include c			·	
		clubs, recreation, newspapers, magazines, and books	13.	·	50.00
		ributions and religious donations	14.	Φ	0.00
-	surance.	pouronee deducted from your new or included in lines 4 or 00			
		nsurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	a. Life insura		15a.	·	0.00
_	b. Health ins		15b.	·	75.00
	c. Vehicle in:		15c.	·	0.00
		urance. Specify:	15d.	\$	0.00
_		nclude taxes deducted from your pay or included in lines 4 or 20.		_	
	ecify:		16.	\$	0.00
		ease payments:			
17	a. Car paym	ents for Vehicle 1	17a.	\$	0.00
17	b. Car paym	ents for Vehicle 2	17b.	\$	0.00
17	c. Other. Spe	ecify:	17c.	\$	0.00
17	d. Other. Spe	ecify:	17d.	\$	0.00
8. Yc	our payments	of alimony, maintenance, and support that you did not report as	3		
		your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
9. Ot	her payments	s you make to support others who do not live with you.		\$	0.00
Sp	ecify:		19.		
). O t	her real prop	erty expenses not included in lines 4 or 5 of this form or on School	edule I: Yo	our Income.	
20	a. Mortgages	s on other property	20a.	\$	0.00
20	b. Real estat	te taxes	20b.	\$	0.00
20	c. Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
		nce, repair, and upkeep expenses	20d.	\$	0.00
		er's association or condominium dues	20e.		0.00
_		or a decodation of condensition date		+\$	
i. Ut	her: Specify:			-τφ	0.00
2. C a	alculate your	monthly expenses			
	a. Add lines 4	· ·		\$	2,252.67
22	b. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	<u>,</u>
		a and 22b. The result is your monthly expenses.		\$	2 252 67
22	o. Aud IIIIe 22	a and 220. The result is your monthly expenses.		φ	2,252.67
3. C a	alculate your	monthly net income.			
	•	12 (your combined monthly income) from Schedule I.	23a.	\$	2,330.42
		monthly expenses from line 22c above.	23b.	·	2,252.67
_0			200.		2,232.01
23	c Subtract v	your monthly expenses from your monthly income.			
20		is your monthly net income.	23c.	\$	77.75
	5 100011	y =		L	
4. D c	you expect a	an increase or decrease in your expenses within the year after yo	ou file this	form?	
Fo	r example, do yo	ou expect to finish paying for your car loan within the year or do you expect you			ease or decrease because o
		terms of your mortgage?			
	No.				
	Yes.	Explain here:			
	. UJ.	1			